



SUPPLEMENTAL APPLICATION DATA SHEET

Inventor Information

Inventor One Given Name:: Sining  
Family Name:: Mao  
Name Suffix::  
Postal Address Line One:: 13927 Aquila Avenue  
Postal Address Line Two::  
City:: Savage  
State or Province:: MN  
Country::  
Postal or Zip Code:: 55378  
City of Residence:: Savage  
State or Prov. of Residence:: MN  
Country of Residence::  
Citizenship Country:: U.S.A.

Inventor Two Given Name:: Eric  
Family Name:: Linville  
Name Suffix::  
Postal Address Line One:: 280 Hidden Lane  
Postal Address Line Two::  
City:: Chanhassen  
State or Province:: MN  
Country::  
Postal or Zip Code:: 55317  
City of Residence:: Chanhassen  
State or Prov. of Residence:: MN  
Country of Residence::  
Citizenship Country:: U.S.A.

Inventor Three Given Name:: Nurul  
Family Name:: Amin  
Name Suffix::  
Postal Address Line One:: 8797 Rainier Drive  
Postal Address Line Two::  
City:: Woodbury  
State or Province:: MN  
Country::  
Postal or Zip Code:: 55125  
City of Residence:: Woodbury  
State or Prov. of Residence:: MN  
Country of Residence::  
Citizenship Country:: U.S.A.

Inventor Four Given Name:: Johannes  
Family Name:: Van Ek  
Name Suffix::  
Postal Address Line One:: 10025 Kingman Lane  
Postal Address Line Two::  
City:: Minnetonka  
State or Province:: MN  
Country::  
Postal or Zip Code:: 55305  
City of Residence:: Minnetonka  
State or Prov. of Residence:: MN  
Country of Residence::  
Citizenship Country:: The Netherlands

Inventor Five Given Name:: Olle G.  
Family Name:: Heinonen  
Name Suffix::  
Postal Address Line One:: 15824 Park Terrace Drive  
Postal Address Line Two::  
City:: Eden Prairie  
State or Province:: MN  
Country::  
Postal or Zip Code:: 55346  
City of Residence:: Eden Prairie  
State or Prov. of Residence:: MN  
Country of Residence::  
Citizenship Country:: U.S.A.

Given name of Applicant::  
Family Name::  
Name Suffix::  
Authority under 1.42::  
Authority under 1.43::  
Authority under 1.47::  
Postal Address Line One::  
Postal Address Line Two::  
City::  
State or Province::  
Country::  
Postal or Zip Code::  
City of Residence::  
State or Prov. of Residence::  
Country of Residence::  
Citizenship Country::

### Correspondence Information

Correspondence Customer Number:: 00164  
Telephone:: 612/339-1863  
Fax:: 612/339-6580  
Electronic Mail:: drfairbairn@kinney.com

### Application Information

Title Line One:: DIFFERENTIAL CPP READER FOR  
Title Line Two:: PERPENDICULAR MAGNETIC RECORDING  
Total Drawing Sheets:: 9  
Formal Drawings?:: Yes  
Application Type:: Utility  
Docket Number:: I69.12-0595  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Application?::

### Representative Information

Representative Customer Number:: 00164

### Continuity Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

### Foreign Priority Information

Country::	Application No.::	Filing Date::	Priority Claimed::

Assignee Information

Name:: Seagate Technology LLC  
Address line one:: ~~7801 Computer Avenue South~~ 920 Disc Drive  
Address line two::  
City:: ~~Bloomington~~ Scotts Valley  
State or Province:: ~~MN~~ CA  
Postal or zip code:: ~~55435-5489~~ 95066